

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Spirit of Democracy America

ADDRESS (number and street)

455 Capitol Mall, Suite 600

☐ Check if different than previously reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00521211

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☒ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
11 / 27 / 2012

through

M M / D D / Y Y Y Y Y Y
12 / 31 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas W. Hiltachk

Signature of Treasurer

Thomas W. Hiltachk

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
01 / 28 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Spirit of Democracy America

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 27 / 2012 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	146346.01	
(c) Total Receipts (from Line 19)	20000.00	2141000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	166346.01	2141000.00
7. Total Disbursements (from Line 31)	160404.66	2150058.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5941.35	5941.35
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Spirit of Democracy America

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
11		27		2012

To:

M M	/	D D	/	Y Y Y Y
12		31		2012

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

20000.00

2141000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

20000.00

2141000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

20000.00

2141000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20000.00

2141000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

20000.00

2141000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	14318.08	57112.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14318.08	57112.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	142775.03	2089635.04
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	3311.55	3311.55
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	160404.66	2150058.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	160404.66	2150058.65

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20000.00	2141000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20000.00	2141000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	14318.08	57112.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	14318.08	57112.06

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +9A-N5HCB
.

Form/Schedule: F3XN

Transaction ID :

All Schedule E entries were previously reported within 24 hours of public distribution of the independent expenditure communications and also as accrued expenses on earlier Form 3X filings. The entries appear on this report because the vendors were paid during the reporting period.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 24

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Spirit of Democracy America

Full Name (Last, First, Middle Initial)

A. Charles Munger, Jr.

Mailing Address 1423 Hamilton Avenue

City

Palo Alto

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed - Charles Munger, Jr.

Occupation

Physicist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1901000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 12 / 2012

Transaction ID : INCA141

Amount of Each Receipt this Period

20000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20000.00

20000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Spirit of Democracy America

Full Name (Last, First, Middle Initial)

A. Bell, McAndrews & Hiltachk, LLP

Mailing Address 455 Capitol Mall, Suite 600

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement
Legal & Accounting Services and Expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2012

Transaction ID : EXPB140

Amount of Each Disbursement this Period

822.63

Full Name (Last, First, Middle Initial)

B. McNally Temple Associates, Inc.

Mailing Address 1817 Capitol Avenue

City	State	Zip Code
Sacramento	CA	95811

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2012

Transaction ID : EXPB128

Amount of Each Disbursement this Period

245.13

Full Name (Last, First, Middle Initial)

C. McNally Temple Associates, Inc.

Mailing Address 1817 Capitol Avenue

City	State	Zip Code
Sacramento	CA	95811

Purpose of Disbursement
Travel expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2012

Transaction ID : EXPB130

Amount of Each Disbursement this Period

1587.23

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2654.99

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 24

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Spirit of Democracy America

Full Name (Last, First, Middle Initial)

A. McNally Temple Associates, Inc.

Mailing Address 1817 Capitol Avenue

City Sacramento State CA Zip Code 95811

Purpose of Disbursement
Website Design & Maintenance

004

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
12 11 2012**Transaction ID : EXPB126**

Amount of Each Disbursement this Period

3072.06

Full Name (Last, First, Middle Initial)

B. McNally Temple Associates, Inc.

Mailing Address 1817 Capitol Avenue

City Sacramento State CA Zip Code 95811

Purpose of Disbursement
Travel expenses

002

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
12 11 2012**Transaction ID : EXPB124**

Amount of Each Disbursement this Period

1091.03

Full Name (Last, First, Middle Initial)

C. Voter/Consumer Research, Inc.

Mailing Address 501 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Polling and Survey Research

005

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
12 13 2012**Transaction ID : EXPB142**

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11663.09

14318.08

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Spirit of Democracy America

Full Name (Last, First, Middle Initial)

A. McNally Temple Associates, Inc.

Mailing Address 1817 Capitol Avenue

City	State	Zip Code
Sacramento	CA	95811

Purpose of Disbursement
Campaign Consultants

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2012

Transaction ID : EXPB134

Amount of Each Disbursement this Period

3311.55

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3311.55

3311.55

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 24

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Spirit of Democracy America

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

T.V. or Cable Airtime and Production Costs

Mailing Address 1817 Capitol Avenue

City State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

22500.00

Transaction ID : PAYD51

Amount Incurred This Period

0.00

Payment This Period

22500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

T.V. or Cable Airtime and Production Costs

Mailing Address 1817 Capitol Avenue

City State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

25000.00

Transaction ID : PAYD52

Amount Incurred This Period

0.00

Payment This Period

25000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Radio Airtime and Production Costs

Mailing Address 1817 Capitol Avenue

City

State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

2500.00

Transaction ID : PAYD92

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 12 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Spirit of Democracy America

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Radio Airtime and Production Costs

Mailing Address 1817 Capitol Avenue

City State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

2500.00

Transaction ID : PAYD93

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

T.V. or Cable Airtime and Production Costs

Mailing Address 1817 Capitol Avenue

City State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

22500.00

Transaction ID : PAYD94

Amount Incurred This Period

0.00

Payment This Period

22500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Travel expenses

Mailing Address 1817 Capitol Avenue

City

State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

1091.03

Transaction ID : PAYD97

Amount Incurred This Period

0.00

Payment This Period

1091.03

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Spirit of Democracy America

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Website Design & Maintenance

Mailing Address 1817 Capitol Avenue

City State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

3072.06

Transaction ID : PAYD98

Amount Incurred This Period

0.00

Payment This Period

3072.06

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Travel expenses

Mailing Address 1817 Capitol Avenue

City State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

245.13

Transaction ID : PAYD99

Amount Incurred This Period

0.00

Payment This Period

245.13

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Travel expenses

Mailing Address 1817 Capitol Avenue

City

State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

1587.23

Transaction ID : PAYD100

Amount Incurred This Period

0.00

Payment This Period

1587.23

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Spirit of Democracy America

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Campaign Consultants

Mailing Address 1817 Capitol Avenue

City State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

3333.00

Transaction ID : PAYD101

Amount Incurred This Period

0.00

Payment This Period

3333.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Campaign Consultants

Mailing Address 1817 Capitol Avenue

City State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

3311.55

Transaction ID : PAYD102

Amount Incurred This Period

0.00

Payment This Period

3311.55

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Polling and Survey Research

Mailing Address 1817 Capitol Avenue

City

State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

1998.87

Transaction ID : PAYD103

Amount Incurred This Period

0.00

Payment This Period

1998.87

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 24

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Spirit of Democracy America

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

McNally Temple Associates, Inc.

Nature of Debt (Purpose):

Polling and Survey Research

Mailing Address 1817 Capitol Avenue

City State

Zip Code

Sacramento

CA

95811

Outstanding Balance Beginning This Period

3443.16

Transaction ID : PAYD104

Amount Incurred This Period

0.00

Payment This Period

3443.16

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Voter/Consumer Research, Inc.

Nature of Debt (Purpose):

Polling and Survey Research

Mailing Address 501 C Street, NE

City State

Zip Code

Washington

DC

20002

Outstanding Balance Beginning This Period

11000.00

Transaction ID : PAYD45

Amount Incurred This Period

0.00

Payment This Period

11000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Voter/Consumer Research, Inc.

Nature of Debt (Purpose):

Polling and Survey Research

Mailing Address 501 C Street, NE

City

State

Zip Code

Washington

DC

20002

Outstanding Balance Beginning This Period

11000.00

Transaction ID : PAYD46

Amount Incurred This Period

0.00

Payment This Period

11000.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 24

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Spirit of Democracy America

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Voter/Consumer Research, Inc.

Nature of Debt (Purpose):

Polling and Survey Research

Mailing Address 501 C Street, NE

City State

Zip Code

Washington

DC

20002

Outstanding Balance Beginning This Period

11000.00

Transaction ID : PAYD95

Amount Incurred This Period

0.00

Payment This Period

11000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Voter/Consumer Research, Inc.

Nature of Debt (Purpose):

Polling and Survey Research

Mailing Address 501 C Street, NE

City State

Zip Code

Washington

DC

20002

Outstanding Balance Beginning This Period

11000.00

Transaction ID : PAYD96

Amount Incurred This Period

0.00

Payment This Period

11000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Voter/Consumer Research, Inc.

Nature of Debt (Purpose):

Polling and Survey Research

Mailing Address 501 C Street, NE

City

State

Zip Code

Washington

DC

20002

Outstanding Balance Beginning This Period

22500.00

Transaction ID : PAYD105

Amount Incurred This Period

0.00

Payment This Period

22500.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 17 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Spirit of Democracy America	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521211 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee McNally Temple Associates, Inc.			Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 11 / 2012 </div>	
Mailing Address 1817 Capitol Avenue			Amount <div style="border: 1px solid black; padding: 2px;"> 22500.00 </div>	
City Sacramento	State CA	Zip Code 95811	Transaction ID : PDTE5	
Purpose of Expenditure T.V. or Cable Airtime and Production Costs		Category/ Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	
Name of Federal Candidate Supported or Opposed by Expenditure: Lois Capps			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1191294.65			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee McNally Temple Associates, Inc.			Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 11 / 2012 </div>	
Mailing Address 1817 Capitol Avenue			Amount <div style="border: 1px solid black; padding: 2px;"> 2500.00 </div>	
City Sacramento	State CA	Zip Code 95811	Transaction ID : PDTE20	
Purpose of Expenditure Radio Airtime and Production Costs		Category/ Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	
Name of Federal Candidate Supported or Opposed by Expenditure: Lois Capps			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1191294.65			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 25000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 18 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Spirit of Democracy America	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521211 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee McNally Temple Associates, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 1817 Capitol Avenue		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2500.00 </div>
City Sacramento	State CA	
Purpose of Expenditure Radio Airtime and Production Costs	Category/Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1191294.65 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : PDTE21

Full Name (Last, First, Middle Initial) of Payee McNally Temple Associates, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 1817 Capitol Avenue		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 22500.00 </div>
City Sacramento	State CA	
Purpose of Expenditure T.V. or Cable Airtime and Production Costs	Category/Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1191294.65 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : PDTE22

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 25000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 25000.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

Signature

M M M / D D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 19 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Spirit of Democracy America	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521211 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee McNally Temple Associates, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 12 / 11 / 2012 </div>
Mailing Address 1817 Capitol Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 25000.00 </div>
City Sacramento	State CA	
Purpose of Expenditure T.V. or Cable Airtime and Production Costs	Category/ Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 1191294.65 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee McNally Temple Associates, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 12 / 11 / 2012 </div>
Mailing Address 1817 Capitol Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1998.87 </div>
City Sacramento	State CA	
Purpose of Expenditure Polling and Survey Research	Category/ Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 1191294.65 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 26998.87 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
01 / 28 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 20 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Spirit of Democracy America	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521211 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee McNally Temple Associates, Inc.			Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1817 Capitol Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3443.16</div>	
City Sacramento	State CA	Zip Code 95811		
Purpose of Expenditure Polling and Survey Research	Category/ Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08		
Name of Federal Candidate Supported or Opposed by Expenditure: Paul Cook			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 729123.21			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee McNally Temple Associates, Inc.			Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1817 Capitol Avenue			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1667.00</div>	
City Sacramento	State CA	Zip Code 95811		
Purpose of Expenditure Campaign Consultants	Category/ Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24		
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1191294.65			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">5110.16</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 21 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Spirit of Democracy America	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521211 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee McNally Temple Associates, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 12 / 11 / 2012 </div>
Mailing Address 1817 Capitol Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1666.00 </div>
City Sacramento	State CA	
Purpose of Expenditure Campaign Consultants	Category/Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Paul Cook		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">729123.21</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : PDTE29

Full Name (Last, First, Middle Initial) of Payee Voter/Consumer Research, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 12 / 11 / 2012 </div>
Mailing Address 501 C Street, NE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 11000.00 </div>
City Washington	State DC	
Purpose of Expenditure Polling and Survey Research	Category/Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Paul Cook		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">729123.21</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : PDTE1

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">12666.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 22 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Spirit of Democracy America	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521211 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Voter/Consumer Research, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 11 / 2012 </div>
Mailing Address 501 C Street, NE		Amount <div style="border: 1px solid black; padding: 2px;"> 11000.00 </div>
City Washington	State DC	
Purpose of Expenditure Polling and Survey Research	Category/ Type <div style="border: 1px solid black; padding: 2px;">24E</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 1191294.65 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Voter/Consumer Research, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 11 / 2012 </div>
Mailing Address 501 C Street, NE		Amount <div style="border: 1px solid black; padding: 2px;"> 11000.00 </div>
City Washington	State DC	
Purpose of Expenditure Polling and Survey Research	Category/ Type <div style="border: 1px solid black; padding: 2px;">24E</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 1191294.65 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 22000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 22000.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Spirit of Democracy America	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521211 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Voter/Consumer Research, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 11 / 2012 </div>
Mailing Address 501 C Street, NE		Amount <div style="border: 1px solid black; padding: 2px;"> 11000.00 </div>
City Washington State DC Zip Code 20002		
Purpose of Expenditure Polling and Survey Research	Category/Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Paul Cook		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 729123.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : PDTE25

Full Name (Last, First, Middle Initial) of Payee Voter/Consumer Research, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 12 / 13 / 2012 </div>
Mailing Address 501 C Street, NE		Amount <div style="border: 1px solid black; padding: 2px;"> 9150.00 </div>
City Washington State DC Zip Code 20002		
Purpose of Expenditure Campaign Consultants	Category/Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1191294.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : PDTE30

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 20150.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 24 OF 24
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Spirit of Democracy America	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521211 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Voter/Consumer Research, Inc.		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 12 / 13 / 2012 </div>
Mailing Address 501 C Street, NE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5850.00 </div>
City Washington	State DC	
Zip Code 20002	Transaction ID : PDTE31	
Purpose of Expenditure Campaign Consultants	Category/Type 24E	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Paul Cook		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 729123.21 </div>		2012

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Zip Code	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Purpose of Expenditure	Category/Type	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought		2012

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5850.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 142775.03 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

01 / 28 / 2013

Signature